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## AMENDMENT TRANSMITTAL FORM

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450Customer No.: 23696  
Attorney Docket No.: 000192  
In Re Application of: Judson, et al.  
Serial Number: 09/998,860  
Filed: November 15, 2001  
Examiner: Tilahun Gesesse  
Group Art Unit: 2684

OCT 17 2005

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

| CLAIMS   | (a) Number Remaining After Amendment | (b) Highest Number Previously Paid For | (c) Extra Claims | Large Entry Fee                                | Fee Paid |
|--|--------------------------------------|--|------------------|--|----------|
| Total*   | 3                                    | 21                                     | 0                | x \$50 =                                       | \$0      |
| Independent**  | 3                                    | 4                                      | 0                | x \$200 =                                      | \$0      |
| Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                      |  |                  | \$360  | \$       |
| EXTENSION FEES   |                                      |  |                  | <input type="checkbox"/> One Month             | \$120    |
|  |                                      |  |                  | <input checked="" type="checkbox"/> Two Months | \$450    |
|  |                                      |  |                  | <input type="checkbox"/> Three Months          | \$1020   |
| TERMINAL DISCLAIMER  |                                      |  |                  | \$130  | \$       |
|  |                                      |  |                  | TOTAL FEE                                      | \$450.00 |

\*If the number in column a is less than 20, enter 0 in column c.

\*\*If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$\_\_\_\_\_ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$450.00.  
The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: October 17, 2005

Signature: Donald C. Kordich, Reg. No. 38,213  
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OCT 18 2005

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(TRANSAMD.VER1.13-04/30/04)



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DATE: 10/17/05

TO: Amendment  
Commissioner for Patents

ATTN: Examiner: Tilahun Gesesse  
Art Unit: 2684

FAX NUMBER: (571) 273-8300

FROM: Donald C. Kordich, Attorney for Applicant  
Registration No. 38,213

Total Number of Pages Sent: 10 (including this transmittal cover sheet)

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FILING BY FACSIMILE:

ATTORNEY DOCKET NO.: 000192

ENCLOSED ARE:

- Amendment (8 pages)
- Transmittal (in duplicate)

APPLICANT: Judson, et al.

ASSIGNEE: QUALCOMM Incorporated

SERIAL NO.: 09/998,860

FILED: November 15, 2001

FOR: METHOD AND APPARATUS FOR USING POSITION LOCATION TO DIRECT NARROW BEAM ANTENNAS

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Please contact Victoria J. Pacey at (858) 651-3411 if all pages do not transmit.

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